



**KALLIVAYALIL PAPPAN MEMORIAL
PUBLIC SCHOOL & JUNIOR COLLEGE**
35th Mile, Mundakayam East P.O., Idukki Dist - 686 513
Phone: 04869 280713,280273 Fax: 04828 27294
e-mail: kmpms_2009@bsnl.in, www.kmppublicschool.org
(Affiliated to C.B.S.E. Reg.No: 930617)

TRANSFER CERTIFICATE

T.C No:

Admission No:

- 1 Name of Pupil
- 2 Father's / Guardian's Name
- 3 Date of birth (in Christian Era) according to Admission and Withdrawal Register
- 4 Nationality
- 5 Whether the candidate belongs to Scheduled Caste / Scheduled Tribe / OBC
- 6 Date of first admission in the school with class
- 7 Class in which the pupil last studied
- 8 School/Board Annual Examination last taken with result
- 9 Subjects studied

- 10 Whether qualified for promotion to the higher class
If so, to which class
- 11 Month upto which the pupil has paid school dues
- 12 Any fee concession availed of: if so, the nature of such concession
- 13 Total No. of working days in the academic session
- 14 Total No. of working days present in the school
- 15 Whether NCC Cadet/Boy Scout/Girl Guide(details may be given)
- 16 Games played or extra curricular activities in which the pupil usually took part (mention achievement level there in)
- 17 General Conduct
- 18 Date of application for certificate
- 19 Date of issue of certificate
- 20 Reason for leaving the school
- 21 Any other remarks

Signature of :

Class Teacher

Checked By
(state the full name and designation)

Principal
Seal